

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	LW	68904	2/15/00
O.I.P.E. CLASSIFIER		48	3/1/00
FORMALITY REVIEW		69055	4-5-00
RESPONSE FORMALITY REVIEW			

**INDEX OF CLAIMS**

- ✓ ..... Rejected
- = ..... Allowed
- (Through numeral)... Canceled
- + ..... Restricted
- N ..... Non-elected
- I ..... Interference
- A ..... Appeal
- O ..... Objected

Claim	Date
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If more than 150 claims or 10 actions  
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